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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

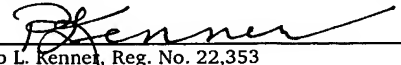
In the application of  
WILLIS J. MULLET  
Serial No.: 10/713,871  
Filed: November 14, 2003  
For: SECTIONAL DOOR  
SYSTEM

) Examiner: BRUCE ALLEN LEV  
)

) Group Art Unit 3634  
)

**Certificate of Mailing**

) I hereby certify that this Amendment A was deposited with the United  
) States Postal Service as first class mail in an envelope addressed to:  
) Mail Stop FEE AMENDMENT, Commissioner for Patents, P.O. Box  
) 1450, Alexandria, VA 22313-1450 on this 1<sup>st</sup> day of November, 2004.

)   
) Phillip L. Kenner, Reg. No. 22,353  
)

) Attorney Docket No. WAY.P.US0054A  
)

**AMENDMENT A**

Mail Stop FEE AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated May 6, 2004, the Applicant, through his attorneys, responds as follows.

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 4 of this paper.

**Remarks/Arguments** begin on page 8 of this paper.

In re application of WILLIS J. MULLET

Serial No. 10/713,871

Filed November 14, 2003

For SECTIONAL DOOR SYSTEM

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Response to the Office Action in the above-identified application.

☐ Small entity status of this application is hereby asserted.☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.☒ No additional fee is required

The fee has been calculated as shown below:

Other Than A Small Entity									
(Col. 1)		(Col. 2)		(Col.3)	Small Entity				
For:	Claims Remaining After Amendment		Highest No. Previously Paid for	Present Extra	Rate	Addit. Fee	Or	Rate	Addit. Fee
Total	20	Minus	20	= 0	x9	\$		x18	\$
Indep	2	Minus	3	= 0	x44	\$		x88	\$
0 First Presentation of Mult. Dep. Claims					150	\$		+300	\$
					Total			Total	\$

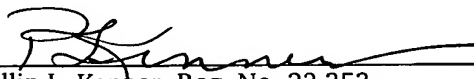
\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please charge my Deposit Account No.18-0987 in the amount of \$\_\_\_\_\_. A duplicate copy of this sheet is attached.☐ A check in the amount of \$\_\_\_\_\_ is attached.☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No.18-0987. A duplicate copy of this sheet is attached.☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims, in the event sufficient payment is not enclosed.☒ Any patent application processing fees under 37 CFR 1.17.Date: November 1, 2004

  
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